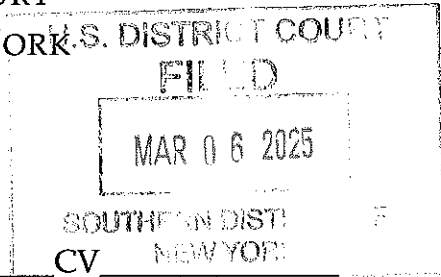


UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK



John H. Shen-Sampas

Write the full name of each plaintiff.

(Include case number if one has been assigned)

-against-

Peter S. Klein

COMPLAINT

Do you want a jury trial?

☒ Yes ☐ No

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

- ☐ Federal Question
- ☒ Diversity of Citizenship

A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

28 U.S.C. § 1332

B. If you checked Diversity of Citizenship

1. Citizenship of the parties

Of what State is each party a citizen?

The plaintiff, John H. Shen-Sampas, is a citizen of the State of
(Plaintiff's name)

New York

(State in which the person resides and intends to remain.)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of

If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:

The defendant, **Peter S. Klein**, is a citizen of the State of
(Defendant's name)

Pennsylvania

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of

If the defendant is a corporation:

The defendant, _____, is incorporated under the laws of
the State of _____

and has its principal place of business in the State of _____

or is incorporated under the laws of (foreign state) _____

and has its principal place of business in _____.

If more than one defendant is named in the complaint, attach additional pages providing information for each additional defendant.

II. PARTIES

A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional pages if needed.

John	H.	Shen-Sampas
First Name	Middle Initial	Last Name
650 West End Avenue		
Street Address		
New York, New York	NY	10025
County, City	State	Zip Code
646-671-3232	jshensampas@gmail.com	
Telephone Number	Email Address (if available)	

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1: **Peter Klein**
 First Name Last Name
Professor of Medicine
 Current Job Title (or other identifying information)
3400 Civic Center Blvd, Room 9-103 Smillow Center
 Current Work Address (or other address where defendant may be served)
Philadelphia PA 19104
 County, City State Zip Code

Defendant 2:
 First Name Last Name
 Current Job Title (or other identifying information)
 Current Work Address (or other address where defendant may be served)
 County, City State Zip Code

Defendant 3:
 First Name Last Name
 Current Job Title (or other identifying information)
 Current Work Address (or other address where defendant may be served)
 County, City State Zip Code

Defendant 4:

First Name

Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

III. STATEMENT OF CLAIMPlace(s) of occurrence: Philadelphia, PADate(s) of occurrence: October, 2024**FACTS:**

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

1. Plaintiff is a fourth-year medical student at UCSF and Defendant is a program director in charge of the internal medicine physician scientist track program at the University of Pennsylvania.
2. Between June and October, Plaintiff and Defendant had numerous encounters in person and in writing regarding Plaintiff's suitability for the residency program at Penn.
3. Plaintiff told Defendant in all occasions that the start-up, Kor Simulation, was in the process of trying to obtain NIH SBIR funding.
4. Plaintiff told Defendant in all occasions that the application for the patents were filed in 2023 and 2024 and the application had not been published online.
5. Defendant acknowledged the understandings of all the communications from Plaintiff.
6. Plaintiff submitted an application to Defendant in and around September 2024, in which the status of the grant application with the SBIR program was clearly marked as September 1, 2024 and the applications of the patents were documented with specific application numbers and dates.
7. Defendant, in and around October 2024, contacted UCSF alleging that Plaintiff had lied to him about his grant and patent application status.
8. Defendant knew his statement made to UCSF is false.
9. Defendant made such statement negligently and maliciously with the intent to hurt Plaintiff's reputation and future career.
10. The above-mentioned statement is not privileged.
11. Because of the statement, UCSF launched an investigation into Plaintiff and such investigation further damaged Plaintiff's reputation.

12. During the investigation, Defendant made further statements to Ms. Wallace, the student conduct officer, regarding Plaintiff's intent as lying to gain an advantage in the match process, while Defendant knew the correct status of the patent and grant applications.

13. Defendant's statements and action are in violation of the Pennsylvania statute of defamation (Title 42, Pennsylvania Consolidated Statutes, §§ 8341–8345).

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

14. Plaintiff suffered irreparable damages to his professional reputation.

15. Plaintiff suffered emotional distress

16. Plaintiff suffered irreparable loss of future income and livelihood.

IV. RELIEF

State briefly what money damages or other relief you want the court to order.

1. Award Plaintiff \$20,000,000.00 for lost income and future opportunities as a physician.

2. Award Plaintiff \$10,000,000.00 for punitive damages for the malicious nature of the actions

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

3/6/25

Dated

JohnH.

First Name

Middle Initial

Plaintiff's Signature

Shen-Sampas

Last Name

650 West End Avenue

Street Address

New YorkNY10025

County, City

State

Zip Code

646-671-3232

Telephone Number

jshensampas@gmail.com

Email Address (if available)

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

☒ Yes ☐ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.